

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER Wagner Post		2. DATE 9/27/2024
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE \$ 75In/\$85OutState
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 209 S Main Avenue, Wagner, Charles Mix County, South Dakota 57380		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 209 S Main Avenue, Wagner, South Dakota 57380		
6. FULL NAME OF PUBLISHER: Barbra Ann Pechous		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME Pechous Publications LLC		COMPLETE MAILING ADDRESS 209 S Main Avenue, Wagner, SD 57380
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	855	836
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	110	107
2. Mail Subscription (Paid and or requested)	533	436
3. Paid Electronic Copies	45	51
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	688	594
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	30	30
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	718	624
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	137	212
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	855	836

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Barbra Ann Pechous
(Signature)

State of South Dakota)
County of *Charles Mix*)
(Seal)

Owner/Publisher
(Title)
Sworn to before me this *26* day of *September*, 20*24*
[Signature]
Notary Public
My commission expires: *07-27-2028*